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## PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2001

Application or Docket Number

612.4091 4500

| CLAIMS AS FILED - PART I  |  |   |              |                               |                              |                    | SMALL ENTITY |              |                        |         | OTHER THAN          |                        |  |
|---|--|---|--------------|-------------------------------|------------------------------|--------------------|--------------|--------------|------------------------|---------|---------------------|------------------------|--|
| ТС  | TAL CLAIMS                                     |   | (Column 1)   |                               | (Column 2)                   |                    | T            | TYPE         |                        | OR      | OR SMALL ENTIT      |                        |  |
| TOTAL CLAIMS  |  |   | Ų            |                               |                              |                    |              | RATE         | FEE                    |         | RATE                | FEE                    |  |
| FOR   |  |   | NUMBER FILED |                               | NUMBER EXTRA                 |                    | E            | BASIC FEE    | 370.00                 | OR      | BASIC FEE           | 740.00                 |  |
| TOTAL CHARGEABLE CLAIMS   |  |   | Ŭ minus 20=  |                               | *                            | <i>\( \delta\)</i> |              | X\$ 9=       |                        | OR      | X\$18=              |                        |  |
| IND   | EPENDENT CL                                    | AIMS                                      | 1 minus 3 =  |                               | *                            | 0                  | 1            | X42=         |                        | OR      | X84=                |                        |  |
| MU  | LTIPLE DEPEN                                   | IDENT CLAIM PI                            | RESENT       |                               |                              |                    |              | +140=        |                        | OR      | +280=               |                        |  |
| * If  | the difference                                 | in column 1 is                            | less than ze | ero, ente                     | r "0" in c                   | olumn 2            | الحا         | TOTAL        |                        | OR      | TOTAL               | 740                    |  |
|   | C  |   |              |                               | •                            | OTHER              |              |              |                        |         |                     |                        |  |
|   |  | (Column 1)                                | (Colum       |                               |                              | (Column 3)         |              | SMALL        | YTITME                 | OR      | SMALL               | YTITME                 |  |
| AMENDMENT A   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT | •            | HIGH<br>NUM<br>PREVIO<br>PAID | BER<br>OUSLY                 | PRESENT<br>EXTRA   |              | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            |                              | =                  |              | X\$ 9=       |                        | OR      | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus        | ***                           |                              | =                  |              | X42=         |                        | OR      | X84=                |                        |  |
| <u> </u>  | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |                              |                    |              | +140=        |                        | OR      | +280=               |                        |  |
|   |  |   |              |                               |                              |                    |              |              |                        |         | TOTAL               |                        |  |
|   |  | Αľ  | ODIT. FEE    |                               | JO. 1                        | ADDIT. FEE         |              |              |                        |         |                     |                        |  |
|   |  | (Column 1)<br>CLAIMS                      | [            | (Colur                        | EST                          | (Column 3)         |              |              | ADDI-                  |         |                     | ADDI-                  |  |
| AMENDMENT B   |  | REMAINING<br>AFTER<br>AMENDMENT           |              | NUM<br>PREVIO<br>PAID         | OUSLY                        | PRESENT<br>EXTRA   |              | RATE         | TIONAL<br>FEE          |         | RATE                | TIONAL<br>FEE          |  |
|   | Total  | *   | Minus        | **                            |                              | =                  |              | X\$ 9=       |                        | OR      | X\$18=              |                        |  |
| INE.  | Independent                                    | *   | Minus        | ***                           |                              | =                  |              | X42=         | 11 - 1                 | OB      | X84=                | V                      |  |
| ٩   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |                              |                    | -            |              |                        | OR      |                     |                        |  |
|   |  |   |              |                               |                              |                    |              | +140=        |                        | OR      | +280=               |                        |  |
| ADDI <sup>-</sup>   |  |   |              |                               |                              |                    |              |              |                        | OR      | TOTAL<br>ADDIT. FEE |                        |  |
|   |  |   |              |                               |                              |                    |              |              |                        |         |                     |                        |  |
| AMENDMENT C   |  | CLAIMS<br>REMAINING<br>AFTER<br>AMENDMENT |              | PREVI                         | HEST<br>IBER<br>OUSLY<br>FOR | PRESENT<br>EXTRA   |              | RATE         | ADDI-<br>TIONAL<br>FEE |         | RATE                | ADDI-<br>TIONAL<br>FEE |  |
|   | Total  | *   | Minus        | **                            |                              | =                  |              | X\$ 9=       |                        | OR      | X\$18=              |                        |  |
|   | Independent                                    | *   | Minus        | ***                           |                              | =                  |              | X42=         |                        | OR      | X84=                |                        |  |
|   | FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM |   |              |                               |                              |                    |              |              |                        | Un      |                     | -                      |  |
|   | If the enter in and                            |   | +140=        |                               | OR                           | +280=              |              |              |                        |         |                     |                        |  |
| * If the entry in column 1 is less than the entry in column 2, write "0" in column 3.  ** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20."  ***If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."  OR  ADDIT. FEE |  |   |              |                               |                              |                    |              |              |                        |         |                     |                        |  |
|   |  | nber Previously Pa                        |              |                               |                              |                    | r foun       | d in the app | propriate bo           | k in co | lumn 1.             |                        |  |